

Promotional Examination
APPLICATION

Fire Department Business Finance Manager

Name _____

Home Address _____ Phone _____

City, State, Zip _____

City Department _____ Phone _____

Cell Phone _____ Social Security Number _____

RACE: ☐ Black ☐ Hispanic ☐ American Indian ☐ Asian ☐ White

SEX: ☐ Male ☐ Female

Race and sex data are collected for the purpose of complying with Federal Regulations. This form will not become part of your permanent personnel file.

An education and experience questionnaire is included with this application. Both application and questionnaire must be completed and returned to the Fire and Police Commission by April 22, 2004.

Return in person or by mail to:

Department of Employee Relations
Fire and Police Commission
Room 706, City Hall, 200 East Wells Street
Milwaukee, WI 53202
(414) 286-5067

MILWAUKEE FIRE AND POLICE COMMISSION

Education and Experience Questionnaire For Business Finance Manager in the Milwaukee Fire Department

Thank you for your interest in this position. This questionnaire is an important part of the selection process and must be fully completed. It has been prepared to give all applicants the same opportunity to explain their background as it relates to this position. The information you provide will be evaluated to determine your eligibility for further consideration. Please fill out this form completely and accurately. Incomplete or inaccurate information will not be considered. Please type or use BLACK INK (for reproduction purposes) and attach this questionnaire to your completed application. Please ATTACH ADDITIONAL PAGES USING SAME FORMAT WHEREVER NECESSARY. A RESUME WILL NOT BE ACCEPTED AS A SUBSTITUTE FOR THIS QUESTIONNAIRE. Please DO NOT say "SEE RESUME".

Name _____

I: EDUCATION AND TRAINING:

A. Bachelor's Degree: Yes ____ No ____

Major: Minor: _____

College or University: _____ Date: _____

B. Master's Degree: Yes ____ No ____

Major: _____ Minor: _____

College or University: _____ Date: _____

Thesis or Special Emphasis: _____

C. Please describe any other education, training or professional seminars you have successfully completed which may relate to this position. (Be sure to include name of institution and dates.)

II. PROFESSIONAL ACCOMPLISHMENTS OR ACTIVITIES

- A. Are you currently licensed as a certified public accountant? Yes ____ No ____
If yes, give state and dates of certification _____
- B. Do you hold any other professional license or certification? Yes ____ No ____
If yes, specify and give state and dates of certification _____

- C. Are you now or have you ever been a member of any professional organization related to this position?

NAME OF ORGANIZATION	DATES OF MEMBERSHIP	OFFICES HELD

III. EMPLOYMENT

Please describe your employment beginning with your current position. If you have had several positions with one employer, please explain each position separately and describe any increased responsibility.

- A. Present employer _____ Hours/week _____
1. Department _____ Work Unit _____
 2. Department's major activity _____
 3. Your title _____
 4. From (Mo./Yr.) _____ To (Mo./Yr.) _____ Total months _____
 5. Name and title of immediate supervisor: _____
 6. Size of operating budget? \$ _____ Size of capital budget \$ _____
 7. Your annual salary \$ _____ Pay range _____ Reason for leaving or wishing to leave position: _____

8. If you directly supervise any personnel, list their job title(s) and number of employees with each title:

9. List and briefly describe your major duties and responsibilities in this job and the approximate percentage of time spent in each area:

_____ %	<hr/> <hr/> <hr/>
_____ %	<hr/> <hr/> <hr/>
_____ %	<hr/> <hr/> <hr/>
_____ %	<hr/> <hr/> <hr/>
_____ %	<hr/> <hr/> <hr/>

10. Describe your main accomplishments on this job (innovations, problem solutions, etc.):

B. Previous employer _____ Hours/week _____

1. Employer's address _____

2. Employer's major activity _____

3. Your title _____

4. From (Mo./Yr.) _____ To (Mo./Yr.) _____ Total months _____

5. Name and title of immediate supervisor: _____

6. Size of operating budget? \$ _____ Size of capital budget \$ _____

7. Your annual salary \$ _____ Reason for leaving position: _____

8. If you directly supervise any personnel, list job title(s) and number of employees with each title:

9. List and briefly describe your major duties and responsibilities in this job and the approximate percentage of time spent in each area:

_____ % _____

_____ % _____

_____ % _____

_____ % _____

_____ % _____

10. Describe your main accomplishments on this job (innovations, problem solutions, etc.)

C. Previous employer _____ Hours/week _____

1. Employer's address _____

2. Employer's major activity _____

3. Your title _____

4. From (Mo./Yr.) _____ To (Mo./Yr.) _____ Total months _____

5. Name and title of immediate supervisor: _____

6. Size of operating budget? \$ _____ Size of capital budget \$ _____

7. Your annual salary \$ _____ Reason for leaving position: _____

8. If you directly supervise any personnel, list their job title(s) and number of employees with each title:

9. List and briefly describe your major duties and responsibilities in this job and the approximate percent of time spent in each area.

_____ % _____

_____ % _____

_____ % _____

 _____ % _____

 _____ % _____

10. Describe your main accomplishments on this job (innovations, problem solutions, etc.)

IV. PROFESSIONAL EXPERIENCE

A. Please describe your specific experience in each of the following areas, including extent of involvement, level of responsibility, and frequency. For each experience described, please identify the employer where this experience was gained. Attach additional pages if more space is needed.

1. Working with government budget processes.

2. Developing and preparing annual operations budgets.

3. Developing and forecasting capital budgets.

4. Acting as liaison on capital budget projects.

5. Developing budget performance measures.

6. Conducting product and productivity analysis.

7. Developing fiscal policy.

8. Developing and making budget or fiscal presentations.

9. Developing a strategic plan.

10. Developing and preparing grant applications.

11. Performing financial and operational audits.

12. Identifying and evaluating cost saving and income producing opportunities.

PLEASE READ CAREFULLY BEFORE SIGNING: All information in this Questionnaire is subject to verification. The answers to the questions on the attached pages are true and complete to the best of my knowledge. I understand that falsification of this form may result in disqualification or removal from a City position. I authorize the Milwaukee Fire Department and the Milwaukee Fire and Police Commission to make any inquiries and receive any information about my suitability for this position. I give permission to persons contacted to provide such information. I further waive, release and covenant not to sue any person or organization for any result of providing, obtaining or acting upon such information. I understand that such information is sought with confidentiality, and I will not request copies of such information. A copy of this authorization shall be as effective as the original.

Name (print) _____

Signature _____ Date _____